



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

John Siben, Treasurer
 Haier Marine Group Inc. Political Action
 Committee (HALPAC)
 P.O. Box 3029
 13085 Seaway Road
 Gulfport, MS 39505

MAR 06 2003

Identification Number: C00321802

Reference: Mid-Year (1/1/01-6/30/01), Year End (7/1/01-12/31/01), July Quarterly
 (4/1/02-6/30/02) and October Quarterly (7/1/02-9/30/02) Reports

Dear Mr. Siben:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion(s) attached) discloses one or more contributions which appear to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) prohibits a multicandidate committee and its affiliates from making a contribution to a candidate for federal office in excess of \$5,000 per election.

If any apparently excessive contribution in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information.

If any contribution you made exceeds the limits, you must request a refund of the excessive amount or provide a written authorization for a redesignation of the contribution pursuant to 11 CFR §110.2(b) within 60 days of the treasurer's receipt.

If the foregoing conditions for redesignations were not met within 60 days of the treasurer's receipt, your committee must obtain a refund of the excessive amount.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund or redesignation request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

A response or amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Maureen Benitz
Campaign Finance Analyst
Reports Analysis Division

SCHEDULE B**ITEMIZED DISBURSEMENTS**

See separate schedules
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
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Any information contained herein may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (If Paid) - 440-7767 MURKIN GROUP

Political Action Committee (PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NEW REPUBLICAN MARCHING 1301 PENNSYLVANIA AVE. N.W. SUITE 500 WASHINGTON, D.C. 20004	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	4-9-98	5,000.00
FRIENDS OF D.D. LIVINGSTON P.O. Box 6329 NEW JERSEY 07074	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	5-5-98	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF 1301 K STREET 430 FIRST STREET S.E. WASHINGTOM, D.C.	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	5-2-98	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THE DEFEASANT COMMITTEE LESS PROFITS IN THE 20TH NEW ORLEANS, LA. 70130	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	5-23-98	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BAKER FOR CONGRESS P.O. Box 1494 BETHANY RIDGE, LA. 70921	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	6-12-98	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THE BILLY TAUZIN COMMITTEE P.O. BOX 1497 THIBODAUX, LA. 70302	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	6-12-98	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. SENATOR THIRD COAST SENATE VICTORY FUND 515 CAPITOL COURT N.E. SUITE 1000, TEL. 202-224-2200	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	6-18-98	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
SUBTOTAL of Disbursements This Page (optional)			10,000.00
TOTAL This Period (last page the line number only)			10,000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

 Use separate schedules
for each category of the
Detailed Summary Page

 FOR LINE NUMBERS:
(check only one)

 21a 22 23 24 25
 26 27 28a 28b 29

PAGE 1 OF 1

 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions
or for commercial purposes, etc; thus using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)

HAWAIIAN Islands Political Action Committee

Full Name (Last, First, Middle Initial)

A. Whom For Candidate

 Mailing Address
500 West Maile St., Suite 216

 City State Zip Code
Honolulu HI 96813

Purpose of Disbursement

Contribution

Candidate Name

TIAHAD CECARES

 O.L.T.
Category Type

Date of Disbursement

10/24/2001

Amount of Each Disbursement this Period

\$ 0.00

Office Sought

 House
 Senate
 President

 Disbursement For
 Primary
 General
 Other (Specify) □

State: HI District: 1ST

Full Name (Last, First, Middle Initial)

Date of Disbursement

10/24/2001

Amount of Each Disbursement this Period

\$ 0.00

B. Cont'd From Schedule

 Mailing Address
133 E. Charter St., Suite 614

 City State Zip Code
Honolulu HI 96813

Purpose of Disbursement

Contribution

Candidate Name

TIAHAD CECARES

 O.L.T.
Category Type

Office Sought

 House
 Senate
 President

 Disbursement For
 Primary
 General
 Other (Specify) □

State: HI District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

10/24/2001

Amount of Each Disbursement this Period

\$ 0.00

C. Next Disbursement Majority Fund

 Mailing Address
201 Alakea St., Suite 530

 City State Zip Code
Honolulu HI 96813

Purpose of Disbursement

Contribution

Candidate Name

TIAHAD CECARES

 O.L.T.
Category Type

Office Sought

 House
 Senate
 President

 Disbursement For
 Primary
 General
 Other (Specify) □

State: HI District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

10/24/2001

Amount of Each Disbursement this Period

\$ 0.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL, This Itemized (last page this line number only)

FEC Schedule B Form 3X (Revise 10/1)

SCHEDULE B (FEC Form 2X)
ITEMIZED DISBURSEMENTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FILER UNIT NUMBER:
 (check only one)

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<input type="checkbox"/> 216	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28	<input type="checkbox"/> 28A	<input type="checkbox"/> 28B
			<input type="checkbox"/> 28C	<input type="checkbox"/> 29

 Any information contained herein such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions
 or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in P.M.)

Full Name (Last, First, Middle Initial)

A. Taylor, Gene "Taylor for Congress"

Mailing Address: 302 1/2 St. 90

City: <u>St. Louis</u>	State: <u>MS</u>	Zip Code: <u>39558</u>
Purpose of Disbursement:		<input checked="" type="checkbox"/> Contribution
Candidate Name:		<u>Gene Taylor</u>
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:
State:	MS	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) <u> </u>
Full Name (Last, First, Middle Initial)		

Date of Disbursement

10/13/2001

Amount of Each Disbursement This Period

1,000.00

B. Thad Cochran for Congress

Mailing Address: 168 E. Capitol Street, Ste. 604

City: <u>Jackson</u>	State: <u>MS</u>	Zip Code: <u>39201</u>
Purpose of Disbursement:		<input checked="" type="checkbox"/> Contribution
Candidate Name:		<u>Thad Cochran</u>
Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:
State:	MS	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) <u> </u>
Full Name (Last, First, Middle Initial)		

Date of Disbursement

10/21/2001

Amount of Each Disbursement This Period

1,000.00
MB

C. Pickering for Congress

Mailing Address: 605 Upland Place

City: <u>Alexandria</u>	State: <u>VA</u>	Zip Code: <u>22301</u>
Purpose of Disbursement:		<input checked="" type="checkbox"/> Contribution
Candidate Name:		<u>Charles W. "Chip" Pickering</u>
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:
State:	MS	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) <u> </u>
Full Name (Last, First, Middle Initial)		

Date of Disbursement

10/23/2001

Amount of Each Disbursement This Period

1,000.00
MB

SUBTOTAL of Disbursements This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

3,000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

 See separate schedules
 for each category of the
 Disbursed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE OF

<input type="checkbox"/> 210	<input type="checkbox"/> 220	<input type="checkbox"/> 230	<input type="checkbox"/> 240	<input type="checkbox"/> 250
<input type="checkbox"/> 260	<input type="checkbox"/> 270	<input type="checkbox"/> 280	<input type="checkbox"/> 290	<input type="checkbox"/> 300

 Any information copied from such Reports and Statements may not be used or given by any person for the purpose of soliciting contributions
 or for purposes of disclosure, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Walter Mondale Political Action Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

02	28	2002
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Amount of Each Disbursement this Period

500000

New Democratic Majority Fund

Mailing Address

201 1/2 W. VINE ST. SUITE 530

City State Zip Code

ALBUQUERQUE NM 87514

Purpose of Disbursement

Contribution

Category

Type

Candidate Name

Tom Hilt

Office Sought

<input checked="" type="checkbox"/>	House
<input checked="" type="checkbox"/>	Senate
<input type="checkbox"/>	President

 Disbursement For:

<input type="checkbox"/>	Primary
<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) <input type="text"/>

State: NM

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

02 28 2002

Amount of Each Disbursement this Period

100000



Picketers Tax Committee

Mailing Address

1005 U.S. 1st Place

City State Zip Code

ALBUQUERQUE NM 87501

Purpose of Disbursement

Contribution

Category

Type

Candidate Name

Candidates W. "Chris" Picketers

Office Sought

<input checked="" type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

 Disbursement For:

<input type="checkbox"/>	Primary
<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) <input type="text"/>

State: NM

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

02 28 2002

Amount of Each Disbursement this Period

600000

C.

Mailing Address

City State Zip Code

ALBUQUERQUE NM 87501

Purpose of Disbursement

Candidate Name

Category

Type

Office Sought

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

 Disbursement For:

<input type="checkbox"/>	Primary
<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) <input type="text"/>

State: NM

District:

SUBTOTAL of Disbursements This Page (Optional)

600000

TOTAL This Period (last page this line number only)

600000

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedules
for each category of the
Detailed Summary Page

FORM LINE NUMBER:
(Check only one)

<input type="checkbox"/> 216	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 284	<input type="checkbox"/> 285	<input type="checkbox"/> 29

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or for committee purposes, other than using the name and address of any political committee to solicit contributions from such individuals.

NAME OF COMMITTEE (In Full)

WALTER MARCUS Political Action Committee

Fax Name (Last, First, Middle Initial)

A. Congressional Post Subsidies

Mailing Address
1825 S. CALIFORNIA ST. SUITE 3000

State

Zip Code

City

Mo. 30261

Purpose of Disbursement
Contribution

Category
Type

Congress Name

Other Source: House
 Senate
 President
Sister: Chapter
Fax Name (Last, First, Middle Initial)

Disbursement Fmt:
 Primary
 General
 Other (Specify) □

Date of Disbursement

64 / 63 / 2002

Amount of Each Disbursement this Period

3,000.00

MB

B. Legislative Post Subsidies

Mailing Address
1825 S. CALIFORNIA ST. SUITE 3000

State

Zip Code

City

Mo. 30261

Purpose of Disbursement

Category
Type

Congress Name

Other Source: House
 Senate
 President
Sister: Chapter
Fax Name (Last, First, Middle Initial)

Disbursement Fmt:
 Primary
 General
 Other (Specify) □

Date of Disbursement

64 / 63 / 2002

Amount of Each Disbursement this Period

3,000.00

C.

Mailing Address

State

Zip Code

City

Purpose of Disbursement

Category
Type

Congress Name

Other Source: House
 Senate
 President
Sister: Chapter
Fax Name (Last, First, Middle Initial)

Disbursement Fmt:
 Primary
 General
 Other (Specify) □

Date of Disbursement

64 / 63 / 2002

Amount of Each Disbursement this Period

3,000.00

GRAND TOTAL of Disbursements this Page (continued)

5,510.00

TOTAL THIS PERIOD (last page this form number only)

FEC Schedule B (Form 3X) (Revised 1/93)

SCHEDULE B (FEC Form 9K)
ITEMIZED DISBURSEMENTS

 Use separate schedules
for each category of the
Detailed Summary Page

 FORM PAGE NUMBER:
(Select only one)

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<input type="checkbox"/> 216	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28	<input type="checkbox"/> 29	<input type="checkbox"/> 30
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NAME OF COMMITTEE (In Full)

House Members Political Action Committee

Full Name (Last, First, Middle Initial)

A.

The George W. Bush Fund

Mailing Address

405 13th and F Streets

State

Zip Code

City

Washington, D.C.

U.S.

20530

Purpose of Disbursement

Contribution/Expense

Candidate Name

George W. Bush

Category Type

P.L.I.

Office Sought

 House

 Senate

 President

 Other

Disbursement For

 Primary

 General

 Other (Specify)

State: N.C.

District: 5th

Full Name (Last, First, Middle Initial)

Date of Disbursement

<input checked="" type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
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Amount of Each Disbursement This Period

<input type="checkbox"/> 5,000.00

B.

The George W. Bush Fund

Mailing Address

500 13th Street NW

State

Zip Code

City

Washington

D.C.

20530

Purpose of Disbursement

Contribution/Expense

Candidate Name

The George W. Bush Fund

Category Type

P.L.I.

Office Sought

 House

 Senate

 President

 Other (Specify)

Disbursement For

 Primary

 General

 Other (Specify)

State: N.C.

District: 5th

Full Name (Last, First, Middle Initial)

Date of Disbursement

<input checked="" type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
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Amount of Each Disbursement This Period

<input type="checkbox"/> 5,000.00

C.

George W. Bush Fund

Mailing Address

500 13th Street NW

State

Zip Code

City

Washington

D.C.

20530

Purpose of Disbursement

Contribution/Expense

Candidate Name

George W. Bush Fund

Category Type

P.L.I.

Office Sought

 House

 Senate

 President

 Other (Specify)

Disbursement For

 Primary

 General

 Other (Specify)

State: N.C.

District: 5th

<input checked="" type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
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Amount of Each Disbursement This Period

<input type="checkbox"/> 5,000.00

 SUBTOTAL of Disbursements This Page (optional)

 TOTAL This Period (and page 2 if the number only)

<input type="checkbox"/> 13,000.00
